



RON DESANTIS  
GOVERNOR

MARY C. MAYHEW  
SECRETARY

## MEMORANDUM

**Date:** July 6, 2020  
**To:** Johnnie Mae Peters, SMA Supervisor, Finance and Banking  
**From:** *ZD* Zainab Day, Regulatory Analyst Supervisor  
**Subject:** Retroactive Nursing Facility Per Diem Rates

---

We have revised the following Nursing Facility Per Diem Rates. Attached are the rate change notices for HP.

	<u>Provider Name</u>	<u>Provider Number</u>	<u>Type of Action</u>	<u>Number of Rate Change Notices</u>
1.	Stuart Rehabilitation and Healthcare	0 251673-00	Covid-19 Rate Adjustment	1
			<b><u>TOTAL:</u></b>	1

If you have any questions regarding the above contact Zainab Day 412-4798.  
ZD/nr



		Single Level	Level H: AIDS	Single Level	Single Level		
Provider Number	Effective Date Format YYYYMMDD	Intermediate I (IN1)	Skilled AIDS (SKA)	Intermediate II (IN2)	Skilled (SKD)	MFAO number	Audit Number
025167300	20200713	569.80	0.00	244.10	244.10	88039-20	



State of Florida Office of Medicaid Cost Reimbursement Planning and Finance

2727 Mahan Drive - Mail Stop 23

Tallahassee, Florida 32308

**Medicaid Reimbursement Per Diem Rates**

STUART REHABILITATION AND HEALTHCARE	Provider Number:	0 251673-00
1500 SE PALM BEACH RD	Date:	7/6/2020
STUART, FL 34994	Fiscal Year End:	12/31/2017
	Audit Status:	Unaudited

**Provider Type:**

	Current Rate	New Rate	Effective Date
<b>Nursing Home    Single Level - Bed Hold</b>	<b><u>244.10</u></b>	<b><u>244.10</u></b>	<b><u>7/13/2020</u></b>
<b>Intermediate I - Standard Medicaid Rate</b>	<b><u>0.00</u></b>	<b><u>569.80</u></b>	<b><u>7/13/2020</u></b>

<b>Rate Type:</b>	
<input type="checkbox"/> Interim	<input checked="" type="checkbox"/> Prospective
<input type="checkbox"/> Total Interim	<input checked="" type="checkbox"/> Total Prospective
<input type="checkbox"/> Interim Component	<input type="checkbox"/> Total Prospective with Interim Component
<input type="checkbox"/> Settlement based on cost	
<input type="checkbox"/> Prior Provider Prospective data	

<b>Basis:</b>	
<input type="checkbox"/> Budget	
<input checked="" type="checkbox"/> Unaudited costs	
<input type="checkbox"/> Field audited costs	
<input type="checkbox"/> Desk audited costs	

<b>Changes:</b>	
<input type="checkbox"/> Rate Semester Change	
<input checked="" type="checkbox"/> COVID-19 Rate Adjustment effective 7/13/2020	

**Distribution:**

Contract Management / Fiscal Agent

Permanent File

For Information Only

No Change in Rate

Home Office:

No Home Office

**Zainab Day**

Medicaid Cost Reimbursement Planning and Finance